## EXHIBIT 6



## **Texas Franchise Tax Public Information Report**

To be filed by Corporations, Limited Liability Companies (LLC), Limited Partnerships (LP), Professional Associations (PA) and Financial Institutions

| Taxpayer number  3 2 0 6 2 1 4 5 8 3 7  2 0 1 7  Secretary of State (SOS) file number or Comptroller file number of Comptroller f |
|--|
| axpayer name  GENESIS COIN INC  GENESIS COIN INC  TOO Lavaca St Suite 1401  State  TX  Secretary of State (SOS) file number or comproduce the applicable information in Sections A, B and C.  Trincipal office  700 Lavaca St Suite 1401, Austin, TX, 78701  Trincipal place of business 700 Lavaca St Suite 1401, Austin, TX, 78701  Trincipal place of business 700 Lavaca St Suite 1401, Austin, TX, 78701  Trincipal place of business 700 Lavaca St Suite 1401, Austin, TX, 78701  Trincipal place of business 700 Lavaca St Suite 1401, Austin, TX, 78701  Trincipal place of business 700 Lavaca St Suite 1401, Austin, TX, 78701  Trincipal place of business 700 Lavaca St Suite 1401, Austin, TX, 78701  Trincipal place of business 700 Lavaca St Suite 1401, Austin, TX, 78701  Trincipal place of business 700 Lavaca St Suite 1401, Austin, TX, 78701  Trincipal place of business 700 Lavaca St Suite 1401, Austin, TX, 78701  Trincipal place of business 700 Lavaca St Suite 1401, Austin, TX, 78701  Trincipal place of business 700 Lavaca St Suite 1401, Austin, TX, 78701  Trincipal place of business 700 Lavaca St Suite 1401, Austin, TX, 78701  Trincipal place of business 700 Lavaca St Suite 1401, Austin, TX, 78701  Trincipal place of business 700 Lavaca St Suite 1401, Austin, TX, 78701  Trincipal place of business 700 Lavaca St Suite 1401, Austin, TX, 78701  Trincipal place of business 700 Lavaca St Suite 1401, Austin, TX, 78701  Trincipal place of business 700 Lavaca St Suite 1401, Austin, TX, 78701  Trincipal place of business 700 Lavaca St Suite 1401, Austin, TX, 78701  Trincipal place of business 700 Lavaca St Suite 1401, Austin, TX, 78701  Trincipal place of business 700 Lavaca St Suite 1401, Austin, TX, 78701  Trincipal place of business 700 Lavaca St Suite 1401, Austin, TX, 78701  Trincipal place of business 700 Lavaca St Suite 1401, Austin, TX, 78701  Trincipal place of business 700 Lavaca St Suite 1401, Austin, TX, 78701  Trincipal place of business 700 Lavaca St Suite 1401, Austin, TX, 78701  Trincipal place of business 700 Lavaca St |
| GENESIS COIN INC  # Blacken circle if the maling address has changed. Applied the properties of the pr |
| Austin    State   TX   ZIP code plus 4 78701   0802589148     Blacken circle if there are currently no changes from previous year; if no information is displayed, complete the applicable information in Sections A, B and C.     Trincipal place of business   700 Lavaca St Suite 1401, Austin, TX, 78701       Trincipal place of business   700 Lavaca St Suite 1401, Austin, TX, 78701       Trincipal place of business   700 Lavaca St Suite 1401, Austin, TX, 78701       Trincipal place of business   700 Lavaca St Suite 1401, Austin, TX, 78701       Trincipal place of business   700 Lavaca St Suite 1401, Austin, TX, 78701       Trincipal place of business   700 Lavaca St Suite 1401, Austin, TX, 78701       Trincipal place of business   700 Lavaca St Suite 1401, Austin, TX, 78701       Tritle   Director   Term   m m d d y y     Term   PRESIDENT   YES   Term   PRESIDENT   Term   PRESID |
| Blacken circle if there are currently no changes from previous year; if no information is displayed, complete the applicable information in Sections A, B and C.  Trincipal office  700 Lavaca St Suite 1401, Austin, TX, 78701  Tonumus report office, director, member, general partner and manager information as of the date you complete this report.  Please sign below! This report must be signed to satisfy franchise tax requirements.  ECTION A Name, title and mailling address of each officer, director, member, general partner or manager.  Itile  PRESIDENT  PRESIDENT  Term  Expiration  Title  Director  Title  Director  Title  Director  Term  Expiration  Title  Director  Term  Expiration  Term  Term  Expiration  Alalling address  City  State  Term  Expiration  Term  Term  Expiration  Alalling address  City  State  Term  Expiration  Term  Term  Expiration  Alalling address  City  State  Term  Expiration  Term  Term  Term  Expiration  Term  Te |
| Trincipal office 700 Lavaca St Suite 1401, Austin, TX, 78701  Trincipal place of business 700 Lavaca St Suite 1401, Austin, TX, 78701  Trincipal place of business 700 Lavaca St Suite 1401, Austin, TX, 78701  This report must be signed to satisfy franchise tax requirements.  ECTION A Name, title and mailing address of each officer, director, member, general partner or manager.  Title Director Term m m d d y y State TX 78701  Term expiration Title Director Term expiration State TX 78701  Term m m d d y y Term expiration Title Director Term expiration Title Term expiration Term expirati |
| Too Lavaca St Suite 1401, Austin, TX, 78701  our must report officer, director, member, general partner and manager information as of the date you complete this report.  Please sign below! This report must be signed to satisfy franchise tax requirements.  ECTION A Name, title and mailling address of each officer, director, member, general partner or manager.  Itile Director Term with a dilling address of the date you complete this report.  PRESIDENT YES Term expiration  |
| This report must be signed to satisfy franchise tax requirements.    Please sign below  This report must be signed to satisfy franchise tax requirements.   100000000015   |
| This report must be signed to satisfy franchise tax requirements.    Please sign below    This report must be signed to satisfy franchise tax requirements.   1000000000015  |
| This report must be signed to satisfy franchise tax requirements.    1000000000015   |
| EVAN ROSE  PRESIDENT  City  Austin  Title  Director  PRESIDENT  Director  Term  Evapiration  Title  Director  Term  Evapiration  Title  Director  Term  Evapiration  Title  Director  Term  Evapiration  Title  Director  Term  Evapiration  Term  Term  Evapiration  Evapiration  Term  Evapiration  Evapiration  Term  Evapiration  Evapiration  Term  Evapiration  Evapiration  Evapiration  Term  Evapiration  Evapiration  Term  Evapiration  Evapir |
| PRESIDENT    Title   Director   Term   m m d d d y y y   Term   m m d d d y y y   Term   m m m d d d y y y   Term   m m m d d d y y y   Term   m m m d d d y y y   Term   m m m d d d y y y   Term   m m m d d d y y y   Term   m m m d d d y y y   Term   m m m d d d y y y   Term   m m m d d d y y y   Term   m m m d d d y y y   Term   m m m d d d y y y   Term   m m m d d d y y y   Term   m m m d d d y y y   Term   m m m d d d y y y   Term   Term   m m m d d d y y y   Term   Term |
| PRESIDENT  Adapting address 700 Lavaca St Suite 1401  Austin  Title  Director  Expiration  Alailing address  Adailing address  Adailing address  Adailing address  Adailing address  City  State  Term  Expiration  Term  Expiration |
| Adailing address 700 Lavaca St Suite 1401    State   TX   78701   7870 |
| Adailing address  City  State  Term expiration  Term m m d d y y  Term expiration  Term exp |
| Aailing address  City  State  ZIP Code  Term expiration  Title  Director  YES  Term expiration  Term expirat |
| Adailing address  City  State  ZIP Code  Adailing address  City  Term expiration  Term expiration  ZIP Code  ZIP Code  Adailing address  City  State  ZIP Code  ZIP Code  ECTION B Enter information for each corporation, LLC, LP, PA or financial institution, if any, in which this entity owns an interest of 10 percent or more lame of owned (subsidiary) corporation, LLC, LP, PA or financial institution  State of formation  Texas SOS file number, if any Percentage of ownership   |
| Aailing address  City  State  ZIP Code  ECTION B Enter information for each corporation, LLC, LP, PA or financial institution, if any, in which this entity owns an interest of 10 percent or more lame of owned (subsidiary) corporation, LLC, LP, PA or financial institution  State of formation  Texas SOS file number, if any  Percentage of ownership  |
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| Name of owned (subsidiary) corporation, LLC, LP, PA or financial institution  State of formation  Texas SOS file number, if any  Percentage of ownership   |
| Name of owned (subsidiary) corporation, LLC, LP, PA or financial institution  State of formation  Texas SOS file number, if any  Percentage of ownership   |
| lame of owned (subsidiary) corporation, LLC, LP, PA or financial institution  State of formation  Texas SOS file number, if any  Percentage of ownership   |
|  |
|  |
| ECTION C Enter information for each corporation, LLC, LP, PA or financial institution, if any, that owns an interest of 10 percent or more in this entity.   |
| lame of owned (parent) corporation, LLC, LP, PA or financial institution  State of formation  Texas SOS file number, if any  Percentage of ownership   |
| Registered agent and registered office currently on file (see instructions if you need to make changes)  You must make a filing with the Secretary of State to change registered   |
| Registered agent and registered office currently on file (see instructions if you need to make changes)  Agent:  You must make a filing with the Secretary of State to change registered agent, registered office or general partner information.  |
| Office: City State ZIP Code  |
| ne information on this form is required by Section 171.203 of the Tax Code for each corporation, LLC, LP, PA or financial institution that files a Texas Franchise Tax Report. Use additional neets for Sections A, B and C, if necessary. The information will be available for public inspection.  |
| declare that the information in this document and any attachments is true and correct to the best of my knowledge and belief, as of the date below, and that a copy of this report has   |
| been mailed to each person named in this report who is an officer, director, member, general partner or manager and who is not currently employed by this or a related corporation,<br>LLC, LP, PA or financial institution.   |
| Title Date Area code and phone number 04/06/2017 ( 760 ) 704 - 7366  |
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| Texas Comptroller Official Use Only  |
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| ║╎┢╎╋═┱┆╸┻╎╵╻┲╘┱┱┪┢╻╴┱╻╏┪┸╽┻╅┦╻╎╎┑╏┎┱┰┍┎╵┰┦┎┧┱┍╈═╬┦┦┦╗╏┑╽╅╟┪┆╒╸┦╸╎╓┯┆╏┆╶┯┆┯┆╶┻╢┆╢╎┆┆┈╸╵╸┆╸┆╸┆╸┆╸┆╸┆╸┆╸┆╸┆╸┆╸┆╸┆╸┆╸┆╸┆╸┆╸┆╸   |

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